

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086179		2 Total pages filed: 25	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable		FIRST Beverly D.	MI	
	NICKNAME		LAST Armstrong	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	
		REDACTED PER 254.0313, GOV'T CODE			
		Date Hand-delivered or Date Postmarked			
		Receipt #		Amount	
		Date Processed			
		Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.		FIRST Christine S.	MI	
	NICKNAME		LAST Willie	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE
	REDACTED PER 254.0313, GOV'T CODE				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(713)	526-6521			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year
		01/01/2025			06/30/2025
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special	<input type="checkbox"/> Other
11 OFFICE	OFFICE HELD (if any) District Judge District 208 Harris			12 OFFICE SOUGHT (if known)	

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

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13 C / OH NAME Armstrong, Beverly D. (The Honorable)	14 Filer ID (Ethics Commission Filers) 00086179
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <hr/>	
		COMMITTEE ADDRESS <hr/>	
		COMMITTEE CAMPAIGN TREASURER NAME <hr/>	
		COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/>	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 42,825.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,570.04
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 39,197.36
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Beverly D. Armstrong

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

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18 FILER NAME Armstrong, Beverly D. (The Honorable)		19 Filer ID 00086179	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	42,825.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	4,570.04
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	1,006.60
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	1,910.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/16 Rpt: 4/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aucion, Kenneth (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Humble, TX 77346	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm not applicable		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Kelly (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Lawyer
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Cheryl S (Ms.) <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/16 Rpt: 5/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce, Kendall (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Engineer		9 Contributor's Job Title VP Pricing Analytics & Industrial Engineering
10 Contributor's employer/law firm Forward Air Corporation		11 Law firm of contributor's spouse (if any) self employed
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderon, William (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$300.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, JL (Mr.) <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of JL Carpenter		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/16 Rpt: 6/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleggett, DeJean (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Missouri City, TX 77459	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Cleggett Law Firm, PLLC		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortes, Eddie (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dupont, Thomas (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/16 Rpt: 7/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Gerald (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77056	7 Amount of Contribution (\$) \$750.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Francis Firm, P.C.		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Casey (Ms.) <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Spence (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Vinas & Graham, PLLC		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/16 Rpt: 8/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 05/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Cary (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77011	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Law Office of Cary H. Hart		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Chadrick (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77054	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollins, Letitia (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/16 Rpt: 9/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hon, William (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Livingston, TX 77351	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Hon Law Firm, PLLC		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Stephanie <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Retired		Contributor's Job Title not applicable
Contributor's employer/law firm not applicable		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keirnan, John "Casey" (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/16 Rpt: 10/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Vivian (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm self employed		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krugh, Neil (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaVine, Brian (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Lavine Law Firm		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/16 Rpt: 11/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Chip (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Chip B. Lewis, LLC		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipkin, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$125.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macerola, Gianpaolo (Mr.) <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Macerola, PLLC		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/16 Rpt: 12/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macerola, Gianpaolo (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77433	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Macerola, PLLC		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayr, Brent (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Mayr Law, P.C.		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moncriff, Tyrone (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/16 Rpt: 13/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolen, Rand (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Fleming, Nolen & Jez, LLP		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norwood, Richardson (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Richardson Law Office		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunnery, Alvin (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$2,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/16 Rpt: 14/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parish II, Damon (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77054	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Parish Law Firm		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Bobby L. (Mr.) Contributor address; City; State; Zip Code Livingston, TX 77351	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powells, Willie (Mr.) Contributor address; City; State; Zip Code Houston, TX 77074	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Willie D. Powells, III, PLLC		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/16 Rpt: 15/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Eric (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Rhodes Law Firm		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Norwood (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Richardson Law Office		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roque, Sara (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Roque Law Firm		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/16 Rpt: 16/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Abbie (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Missouri City, TX 77459	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Russell Law Firm, PLLC		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Shane (Mr.) <hr/> Contributor address; City; State; Zip Code Rosharon, TX 77583	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Shane Sanders, PLLC		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savoy, Bryan (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Attorney
Contributor's employer/law firm Savoy Law Firm		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/16 Rpt: 17/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scardino, Joseph P. (Mr.) <hr/> 6 Contributor address; City; State; Zip Code West University Place, TX 77005	7 Amount of Contribution (\$) \$2,500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharma, Cavita (Ms.) <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slider, Michall (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/16 Rpt: 18/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solomon, Tanika (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77087	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm T.J. Solomon Law Group, PLLC		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, James (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Lawyer
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stambaugh, Frank (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$300.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 16/16 Rpt: 19/25
2 FILER NAME Armstrong, Beverly D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stryker, Kevin (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any) not applicable
12 If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thiessen, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code TX, TX 77008	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Thiessen Law Firm		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Joe (Mr.) <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Joe Wells		Law firm of contributor's spouse (if any) not applicable
If contributor is a child, law firm of parent(s) (if any) not applicable not applicable		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 20/25	2 FILER NAME Armstrong, Beverly D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/26/2025	5 Payee name Chosen Events	
6 Amount (\$) \$1,300.00	7 Payee address; City; State; Zip Code 2111 Katalonia Lane Fresno, TX 77545	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DJ and photo booth expense for fund raiser
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/24/2025	Payee name Edwards, Dineta (Ms.)	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 14335 Hillard Green Lane Houston, TX 77047	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) decorations for fundraiser	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Balloon decorations for fund raiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Edwards, Dineta (Ms.)	
Amount (\$) \$90.00	Payee address; City; State; Zip Code 14335 Hillard Green Lane Houston, TX 77047	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) decorations for fundraiser	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Balance owed to her on balloon decorations for fund raiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 21/25	2 FILER NAME Armstrong, Beverly D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/09/2025	5 Payee name Gray, Russell (Officer)	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 15118 Breeze Forest Court Humble, TX 77346	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security services for fund raising event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/11/2025	Payee name Gray, Russell (Officer)	
Amount (\$) \$160.00	Payee address; City; State; Zip Code 15118 Breeze Forest Court Humble, TX 77346	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security for fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/17/2025	Payee name Houston Lawyers Association	
Amount (\$) \$70.00	Payee address; City; State; Zip Code P.O. Box 300009 Houston , TX 77230	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Membership dues	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 22/25	2 FILER NAME Armstrong, Beverly D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/16/2025	5 Payee name Humble Area Democrats	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code PO Box 3863 Humble, TX 77347	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsor for bowling tournament
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2025	Payee name Michael's Craft Store	
Amount (\$) \$35.71	Payee address; City; State; Zip Code 7630 FM 1960 W Houston, TX 77070	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies for fundraiser	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense supplies for fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2025	Payee name Office Max	
Amount (\$) \$14.07	Payee address; City; State; Zip Code 8202 Kirby Drive Houston, TX 77054	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Petition copy expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 23/25	2 FILER NAME Armstrong, Beverly D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/06/2025	5 Payee name Pinstripes	
6 Amount (\$) \$1,910.00	7 Payee address; City; State; Zip Code 3300 Kirby Drive Suite 3A Houston, TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Deposit paid to secure date for campaign fundraising event in August, 2025.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name Post Net Summerwood	
Amount (\$) \$240.00	Payee address; City; State; Zip Code 12712 W Lake Houston Parkway Suite B Houston, TX 77044	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign mailbox renewal fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2025	Payee name Print N Sign	
Amount (\$) \$200.26	Payee address; City; State; Zip Code 7350 Harwin Drive Suite 316A Houston, TX 77036	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing expense for retractable campaign sign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Armstrong, Beverly D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086179
4 Date 06/30/2025	5 Payee name Raise the Money, INC.	
6 Amount (\$) 1,006.60	7 Payee Address; City; State; Zip PO Box 26466 Little Rock, AR 72221	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Total payment processing fees for reporting period deducted from contributions made by credit card

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 25/25

2 FILER NAME

Armstrong, Beverly D. (The Honorable)

3 Filer ID (Ethics Commission Filers)
00086179

4 Date

06/13/2025

5 Name of person from whom amount is received

Pinestripes

8 Amount (\$)

\$1,910.00

6 Address of person from whom amount is received; City; State; Zip Code

Houston, TX 77098

7 Purpose for which amount is received

Refund of deposit made on 06/06/2025

☐ Check if political contribution returned to filer